

**APPLICATION FOR UNITED STATES POWER OF ATTORNEY
Declaration and Power of Attorney**

As a below named inventor, I hereby declare that:

~~My residence, post office address and citizenship are as stated below next to my name; that~~

I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

1. CIRCUIT BOARD AND SEMICONDUCTOR DEVICE, AND METHOD OF MANUFACTURING THE SAME described and claimed in the specification:

Check one:

*a. [] attached hereto.

b. [X] filed on June 15, 1999 as Application Serial No. 09/332,968 and amended on _____:
(if applicable)

I hereby state that ~~I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.~~

I acknowledge the duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). Under Title 35 U.S. Code §119, the priority benefits of the following foreign application(s) filed within one year prior to this application are hereby claimed.

Japanese Patent Application No.10-166648 filed June 15, 1998

Japanese Patent Application No.10-355837 filed December 15, 1998.

The following applications for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s):

2 If there are no corresponding applications, insert "NONE." None

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

Roger W. Parkhurst, Reg. No. 25,177; Charles A. Wendel, Reg. No. 24,453; and/or Lawrence D. Eisen, Reg. No. 41,009

**ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO:
PARKHURST & WENDEL, L.L.P., 1421 Prince Street, Suite 210, Alexandria, Virginia 22314-2805.
Telephone: (703) 739-0220.**

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

3 Typewritten Full Name of Sole or First Inventor

Yuji

Given Name

Middle Initial

YAGI

Family Name)

***4 Inventor's Signature**

Yuji

Yagi

5 Date of Signature

July 30, 1999

Month

Day

Year

6 Residence

Osaka-shi

Osaka

Japan

7 Citizenship

Japanese

State or Province

Country

8 Post Office Address

(Insert complete mailing address, including country) 4-7-23, Komatsu, Higashiyodogawa-ku,
Osaka-shi, Osaka, 533-0004 JAPAN

*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

**Note to inventor. Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

IF THERE IS MORE THAN ONE INVENTOR, USE PAGE 2 AND PLACE AN "X" HERE

FORM 2 OF U.S.A. DECLARATION FORM
(Do Not Fill This Page in a Sole Inventor Application)

3 Typewritten Full Name of
Second Inventor

Given Name	Middle Initial	Family Name
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Takeo

Middle Initial

YASUHO

Family Name

*4 Inventor's Signature

Takeo Yasuho

5 Date of Signature

July 30, 1999

6 Residence

Month	Day	Year
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Neyagawa-shi

Osaka

Japan

7 Citizenship

City State or Province Country

Japanese

8 Post Office Address

(Insert complete mailing address, including country) S-48-12, Takayanagi Neyagawa-shi, Osaka, 572-0051 JAPAN

3 Typewritten Full Name of

Third Inventor

Given Name	Middle Initial	Family Name)
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*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
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6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

City	State or Province	Country
------	-------------------	---------

8 Post Office Address

(Insert complete mailing address, including country) _____

3 Typewritten Full Name of

Fourth Inventor

Given Name	Middle Initial	Family Name)
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*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
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6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

City	State or Province	Country
------	-------------------	---------

8 Post Office Address

(Insert complete mailing address, including country) _____

3 Typewritten Full Name of

Fifth Inventor

Given Name	Middle Initial	Family Name)
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*4 Inventor's Signature

5 Date of Signature

Month	Day	Year
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6 Residence

City	State or Province	Country
------	-------------------	---------

7 Citizenship

City	State or Province	Country
------	-------------------	---------

8 Post Office Address

(Insert complete mailing address, including country) _____

(Insert complete mailing address, including country) _____

*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.
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IF THERE IS MORE THAN ONE INVENTOR, USE PAGE 3 AND PLACE AN "X" HERE